附件6

报名表1

**第八届世界健身气功交流比赛大会暨第四届世界健身气功科学论坛**

**预报名表**

|  |  |
| --- | --- |
| 国家/地区 |  |
| 协会组织名称 |  |
| 参加论坛人数 |  |
| 参加比赛队伍数量 |  |
| 参加比赛运动员数量 |  |
| 参加功法培训人数 |  |
| 参加教练员培训人数 |  |
| 预定房间情况 |  |
| 参会者中是否有国际气联执委？如有请告诉我们姓名. |  |
| 参会者中是否有专项委员会委员？如有请告诉我们姓名. |  |
| 领队姓名 |  |
| 领队联系方式 |  |

注：此表于2019年3月31日前填报至澳大利亚太极学院（2019@taichiaustralia.com.au）。

填报人：

联系电话：

传 真：

E-mail：

负责人签名：

填 报 时间： 年 月 日

**Appendix 6 – Form 1**

**THE 8TH WORLD HEALTH QIGONG TOURNAMENT AND EXCHANGE**

**THE 4TH WORLD HEALTH QIGONG SCIENTIFIC SYMPOSIUM**

**PRE-REGISTRATION FORM**

|  |  |
| --- | --- |
| Country/region |  |
| Name of organization |  |
| Number of participants to Symposium |  |
| Number of teams to tournament |  |
| Number of athletes to tournament |  |
| Number of participants to Health Qigong advance classes |  |
| Number of participants to IHQF Judge Course |  |
| Accommodation requirement |  |
| If there are IHQF Executive board member(s) in your team, please specify the name(s). |  |
| If there are IHQF specialized committee member(s) in your team, please specify the name(s). |  |
| Name of the team leader |  |
| Contact of team leader |  |

Please send it to the Organizing Committee (Tai Chi Australia, 2019@taichiaustralia.com.au) before March 31st, 2019.

Applicant organization:

Tel:

E-mail：

Signature of Person-in Charge:

Date: 2019